DLN: 93493275007068 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2017 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the Treasury ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization BOY SCOUTS OF AMERICA D Employer identification number B Check if applicable □ Address change 22-1576300 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return 1325 West Walnut Hill Lane ☐ Application pending (972) 580-2000 City or town, state or province, country, and ZIP or foreign postal code Irving, TX 750383008 G Gross receipts \$ 1,804,119,638 F Name and address of principal officer H(a) Is this a group return for Michael A Ashline ☐Yes ☑No 1325 West Walnut Hill Lane Irving, TX 75038 subordinates? H(b) Are all subordinates ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ 1761 Website: ► www Scouting org L Year of formation 1910 M State of legal domicile TX Summary 1 Briefly describe the organization's mission or most significant activities As stated in the Boy Scouts of America Charter - The primary exempt purpose of the Boy Scouts of America is to promote through community organizations, and cooperation with other agencies, the ability of boys to do things for themselves and others, to train them in Scoutcraft, and to teach them patriotism, courage, self-reliance, and kindred virtues, using the methods which are now in common use by Activities & Governance Boy Scouts 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 3 78 78 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 4,114 6 863,906 Total number of volunteers (estimate if necessary) 7a -1,802,454 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 7b -2,527,044 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . 86,763,032 94,114,222 9 Program service revenue (Part VIII, line 2g) . 80,062,230 119,717,691 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 34,497,430 28,353,616 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 27,606,297 24,467,734 228,928,989 266,653,263 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,479,089 2,756,039 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . 77,809,942 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 75,345,735 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) 151,066 113,964 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶7,474,773 227,021,035 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 196,008,184 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 273,984,074 307,700,980 19 Revenue less expenses Subtract line 18 from line 12 . -45,055,085 -41,047,717 Assets or Beginning of Current Year End of Year 1,321,724,358 1,386,074,367 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 691,878,123 752,728,061 629,846,235 633,346,306 22 Net assets or fund balances Subtract line 21 from line 20 . Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-09-17 Signature of officer Sign Here Michael Ashline Chief Financial Officer Type or print name and title Print/Type preparer's name Date PTIN Preparer's signature Check | If Paid self-employed Firm's name Firm's EIN Preparer Firm's address Phone no Use Only ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2017)

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	edule O contains a resp	onse or note to a	any line in this Part II		
1		organization's mission				
						ough community organizations, tcraft, (Continued on Schedule
2	-	, -		vices during the year	which were not listed on	. □Yes ☑No
	the prior Form 990 c					. ∟Yes ⊻No
3	Did the organization services?	ese new services on So cease conducting, or 	make significant	changes in how it con	ducts, any program	. □Yes ☑No
4	Describe the organize Section 501(c)(3) ar	ation's program servic	e accomplishmer	to report the amount	e largest program services, as of grants and allocations to o	
4a	(Code See Additional Data) (Expenses \$	49,034,213	including grants of \$	169,687) (Revenue \$	3,516,657)
4b	(Code See Additional Data) (Expenses \$	11,419,935	including grants of \$	0) (Revenue \$	677,435)
4c	(Code See Additional Data) (Expenses \$	108,844,759	including grants of \$	2,534,852) (Revenue \$	82,900,352)
	See Additional Data	Table				
4d	Other program servi (Expenses \$	ices (Describe in Sched 102,183,298 ind	dule O) cluding grants of	\$ 51	,500) (Revenue \$	32,516,068)
4e	Total program ser	vice expenses ▶	271,482,2	05		

or X as applicable

Checklist of Required Schedules

Page 3

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6 7

4

R

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11a

11b

11c

11d

11e

11f

12a

12b

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Form **990** (2017)

Yes Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Yes

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25a

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28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

IV	Checklist of Required Schedules	(continued)	

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22	V	

		20b		L
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's	23	Yes	

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 660			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►BF , CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

1 01111	390 (2017)			Page
Par	TVI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	ines
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 78			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 78			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
_	•	8a	Yes	
_	The governing body?	8b	Yes	
ь 9		80	162	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- \	No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Coae	Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	Yes	NO
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
h	Describe in Schedule O the process, if any, used by the organization to review this Form 990			110
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		103	
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AL , AR , AZ , CA , CT , FL , GA , IL , IN , MS , NH , NJ , NM , NY , OK , OR , PA , PR VA , WA , WI , WV	<y,ma,ri,s< td=""><td>, MD , I SC , TN ,</td><td>MN , , UT ,</td></y,ma,ri,s<>	, MD , I SC , TN ,	MN , , UT ,
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records Stephanie Phillips 1325 West Walnut Hill Lane Trying TX 750383008 (972) 580-2300			

orm 990 (2	017)										Page 7
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's current off tion Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's current key		•								
vho received organization	organization's five current high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's former office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's former dire , more than \$10,000 of reportab	ectors or trust le compensation	ees that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Part VII Section A. Officers, Direct	tors. Trustees	. Kev l	Empl	ove	es.	and !	Hiał	nest Co	ompen	sate	d Emplovees	(cor	ntinued)	rage o
(A) Name and Title	(B) Average hours per week (list any hours for related	Position than constraints	Position (do not check more than one box, unless person is both an officer and a director/trustee) Output (C) Rep Comp Co								(E) Reportable compensatio from related organizations 2/1099-MISO	on d (W-	(F Estima amount o compen from organizat	ated of other sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/10	, y y - 1112 v	C)	2) 1099-1413		relat organiza	ed
See Additional Data Table														
				H										
1b Sub-Total	art VII, Section	nΑ.				*			6,317,782			0		3,151,197
Total number of individuals (including of reportable compensation from the compensation from the compensation)	but not limited	to thos					rece				00,000	<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3 Did the organization list any former line 1a? If "Yes," complete Schedule 2											employee on		Yes Yes	No
4 For any individual listed on line 1a, is organization and related organization individual	s greater than \$	150,00	0? <i>If</i>	"Yes,	," cc	omplet	te Sc	hedule	J for suc	ch		4		
5 Did any person listed on line 1a receive services rendered to the organization	ve or accrue cor	npensat	tion fr	rom a	any	unrela	ated	organız				5		No
Section B. Independent Contract Complete this table for your five high	est compensate											mpe	nsation	
from the organization Report compe	nsation for the c	alendar	year	endi	ing	with o	r wit	hın the	organız	ation	's tax year (B)		(0	<u> </u>
Name a Ogletree Deakins Nash Smoak & Stewart PC	and business addre	955							Attorne		iption of services		Comper	
PO Box 89 Columbia, SC 29202 WILLKIE FARR & GALLAGHER LLP									ATTORI	NEY				935,372
787 7TH AVE FL 2 NEW YORK, NY 10019														
BOONE KARLBERG PC PO BOX 9199									Attorne	ξÀ			2	,519,097
MISSOULA, MT 59807 FLINTCO LLC, 6020 INDIAN SCHOOL RD NE									CONST	RUCT	ION		5	,366,351
ALBUQUERQUE, NM 87110 LEWIS A WHITTEN									CONST	RUCT	ON			709,072
P O BOX 323 CIMARRON, NM 87714 2 Total number of independent contractor		not lim	uted +			listed	aho	(a) who	recenso	d ma	ire than ¢100 0	100 0	f	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 55

Page **8**

Part \		(2017) Statement of	Revenue										Page 9
				a respo	onse or note to any	line in thi	s Part VIII						🗆
				· · · · · · · · ·		(A Total re	.)	Rela ex fur	(B) ated or empt action		(C) Unrelated business revenue		(D) Revenue xcluded from under sections
	1:	a Federated campaign	ns	1a	172,011			rev	/enue				512-514
nts ints		b Membership dues		1 b	63,669,850								
Gra not		c Fundraising events		1c	142,623								
\$ \f		d Related organizatio	ns	1d	1,329,308								
計画		e Government grants (co	ontributions)	1e	0								
ns,	1	f All other contributions,	, gıfts, grants,										
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included	1 f	28,800,430								
들	!	g Noncash contribution		F 2/	20.620								
nd a		in lines 1a-1f \$ 1 Total. Add lines 1a-1	f		<u>80,629</u>								
	<u>ٔ</u> ـــ	T Totali (da iii es 1a 1			Business		114,222						
	2=	High Adventure Bases in	NM MN EL SE	-d W/V	Busiliess	900099	37 3	27,958	37 13	39,445	188,	513	0
4	_	Local Council Assessmer		ia ww		900099		42,419		2,419	100,	0	0
رد د		: National Eagle Scout Ass		der of t	the Arrow	900099	1,5	95,492	1,59	5,492		0	0
Ę.	d	Regional and Profession	ai Training			900099		94,092		4,092		0	0
S	е	National Jamboree				900099		42,263		2,263		0	0
Program Service Revenue	f	All other program se	rvice revenue			47.604	14,9	15,467	14,91	.5,467		0	0
Ğ	g	Total.Add lines 2a-2f			▶	17,691							
		Investment income (ii			interest, and other		13,135,131			0	1,046,785	5	12,088,346
		similar amounts). Income from investme			ond proceeds		0			0		0	0
						<u> </u>	2,397,503	1		0	()	2,397,503
			(ı) Real		(II) Personal								
	6a	Gross rents		0									
	Ŀ	Less rental expenses	0										
				64.007									
	C	Rental income or (loss)	-	64,237	0								
	c	Net rental income o	r (loss)		· · · •	1	-64,237	,	(0	(0	-64,237
			(ı) Securit	ies	(II) Other								
	7a	Gross amount from sales of assets other than inventory	1,417,2	53,971	2,906,287								
	t	Less cost or other basis and sales expenses	1,400,5	00,933	4,440,840	-							
	c	Gain or (loss)	16,7	53,038	-1,534,553]							
		l Net gain or (loss)			•		15,218,485		·	0	(15,218,485
Other Revenue	Вa	Gross income from for (not including \$ contributions reporte See Part IV, line 18	142,623 ed on line 1c)		124,206								
e v	ŀ	Less direct expense		a b		-							
<u>ا</u>		: Net income or (loss)				J	942	!			(0	942
ŧ.	9a	Gross income from g		es									
Ŭ		See Part IV, line 19		а	 								
	Ŀ	Less direct expense	s	b		1							
	c	Net income or (loss)	from gaming	activit	iles •	<u>.</u>							
	10	aGross sales of invent returns and allowand											
		returns and anowane		а	153,713,024								
	t	Less cost of goods s	sold	b	132,314,328	1							
	c	Net income or (loss)	from sales of	ınven	tory ►		21,398,696		(0	-3,037,752	2	24,436,448
		Miscellaneous			Business Code		252.560						252.540
	11	L a Hıgh Adventure Bas	es - Other Re [,]	venue	900099		253,568		1	0	(0	253,568
	t	Other Regional Reve	nues		900099		416,342	!	ı	0	(0	416,342
	ď	National Eagle Scout	t Association -	Othe	900099		64,920		1	0	(0	64,920
	,	All other revenue .					C	,	(0	()	0
		Total. Add lines 11a			•		724.022			+			
	12	2 Total revenue. See	Instructions				734,830			+		+	
							266,653,263	il .	119,529,17	ଧ	-1,802,454	⁴ Fo	54,812,317 orm 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all	columns All other orga	anizations must comp	lete column (A)	
Check if Schedule O contains a response or note to ar	ny line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	406,747	406,747	<u> </u>	
2 Grants and other assistance to domestic individuals See Par IV, line 22	1,760,888	1,760,888		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	588,404	588,404		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,658,883	3,581,762	1,422,816	654,305
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	S			
7 Other salaries and wages	56,877,179	41,963,270	12,642,662	2,271,247
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	4,299,604	3,172,194	955,716	171,694
9 Other employee benefits	5,161,568	4,329,174	758,974	73,420
10 Payroll taxes	5,812,708	4,288,543	1,292,049	232,116
11 Fees for services (non-employees)				
a Management				
b Legal	1,138,141	1,026,438		111,703
c Accounting	776,807	281,440	495,367	
d Lobbying	948,092		948,092	
e Professional fundraising services See Part IV, line 17	113,964			113,964
f Investment management fees	1,914,917		1,914,917	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,971,144	2,716,406	48,649	206,089
12 Advertising and promotion	3,062,795	2,922,100	73,958	66,737
13 Office expenses	3,132,745	2,887,011	136,336	109,398
14 Information technology	8,134,538	8,134,538		
15 Royalties				
16 Occupancy	17,668,743	17,454,703	44,622	169,418
17 Travel	4,738,138	3,307,441	810,672	620,025
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings	38,940,934	36,769,025	455,202	1,716,707
20 Interest	6,033,113		6,033,113	
21 Payments to affiliates	15,323,155	15,323,155		
22 Depreciation, depletion, and amortization	9,605,533	9,292,181	306,656	6,696
23 Insurance	66,090,598	65,864,217	225,513	868
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				

19,453,924

385,313

25,027,346

1,675,059

307,700,980

18,439,573

25,027,346

1,586,591

271,482,205

359,058

83,389

26,255

69,044

28,744,002

0

930,962

0

0

19,424

7,474,773

Form **990** (2017)

expenses on Schedule O)

b TAXES, PERMITS, AND LICENSES

d PROFESSIONAL DUES AND MEMBERSHIPS

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

a OTHER EXPENSES

c INSURANCE CLAIMS

e All other expenses

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

351,494,161

340.434.898

263,838,162

44,183,178

198,486,356

48.500.000

197.720.365

752.728,061

492,050,516

77,716,090

63.579.700

633,346,306

1.386.074.367

Form **990** (2017)

1.386.074.367

Page **11**

Check if Schedule O contains a response or note to any line in this Part IX

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Accounts payable and accrued expenses

		Beginning of year		End of year
1	Cash-non-interest-bearing	8,279,100	1	5,569,096
2	Savings and temporary cash investments	47,248,675	2	39,620,339
3	Pledges and grants receivable, net	62,215,887	3	60,282,885

60,282,885 3 4.929.576 4 1,875,477 4 Accounts receivable, net . . . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . Inventories for sale or use . 74.261.878 8 68,055,679

Assets 19.694.652 9 14,459,938 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 234,452,300 10a basis Complete Part VI of Schedule D 131,807,048 102.134.214 10c 102,645,252 b Less accumulated depreciation 10b 363.937.338 401.636.642 11 Investments—publicly traded securities . 11

316.429.401

322,593,637

190,006,951

54,609,255

204,069,464

55.000.182

188.192.271

691,878,123

494.883.011

75,709,428

59.253.796

629,846,235

1,321,724,358

1,321,724,358

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Page **12**

2c

Yes

Form 990 (2017)

3 -41,047,717 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4

5 6

Form 990 (2017)

Reconcilliation of Net Assets

Part XI

629,846,235 5 44.547.788 7 8

0 0 Other changes in net assets or fund balances (explain in Schedule O) 9 0 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 633,346,306 Part XII

Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No

☐ Cash ☑ Accrual ☐ Other 1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Νo If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

☐ Separate basis Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b Yes If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

Consolidated basis Separate basis ☐ Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a No

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b

Additional Data

Software ID: 17005980

Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990 (2017)

Form 990, Part III, Line 4a: Field Operations - Support for 266 local councils, including but not limited to, administration of the Journey to Excellence program, business process assessments, assistance with long range planning, member care services for professionals and volunteers and local council and regional support

Form 990, Part III, Line 4b: Human Resources and Training - Administration of human resources policies, including recruiting, placement, and training of professional employees, managing

compensation and benefits programs, and monitoring employee relations

Form 990, Part III, Line 4c: Program Development and Delivery - Development of the program for over 2.1 million registered youth and over 863 thousand adult leaders, providing camping and outdoor literature, materials, and techniques, as well as engineering service, to local councils, managing the volunteer training programs of the Boy Scouts of America and handling all national program support in the areas of health and safety, activities, program evaluation, and low-income program, developing uniforms and insignia and other program

elements, operating the National Scouting Museum, operating four high-adventure bases and the national jamboree

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

11.667.243

(Expenses \$

(Code

Marketing - Administration of public relations, including providing news releases, features for print and broadcast media, and internal news in the form of newsletters, fact sheets, and the annual report for the nationwide Scouting family. In addition, protection and promotion of the Scouting brand

including grants of \$

51,500) (Revenue \$

73.649)

(Code (Expenses \$ 89.013.093 including grants of \$ 0) (Revenue \$ 32,442,419) Scouting Programs Insurance Costs Born for National and Local Councils - The National Council subsidized the group medical, dental, and life insurance programs for its employees and retirees. In addition, the National Council subsidized a general liability insurance program primarily for

the benefit of local councils

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 1.502.962 including grants of \$ 0) (Revenue \$ 0)

Scouting Programs World Bureau Fees - The registration fee that Boy Scouts of America annually pays the World Organization of the Scouting Movement (WOSM) is based on an established fee of registered uniformed adult and youth members. This registration fee supports international enrichment programs for the youth and adult membership. These programs include World Jamborees, National Association encampments, international training programs and conferences, program related magazines, brochures and pamphlets.

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer from the week (list from related compensation any hours and a director/trustee) organization organizations from the

,	any nours	i and	and a director/trustee)					organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Habitutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Glenn Adams Natl Exec Board Member	1 0	X						0	0	0
Lisa Argyros Natl Exec Board Member (June - Dec 2017)	0	X						0	0	0
Jeanne D Arnold Natl Exec Board Member	0	X						0	0	0
Bray Barnes Natl Exec Board Member (June - Dec 2017)	0	X						0	0	0
Scott Beckett Natl Eyer Board Member (June - Dec 2017)	1	×						0	0	0

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Natl Exec Board Member (June - Dec 2017)

David Biegler

Dan Cabela

Ray T Capp

Natl Exec Board Member B Howard Bulloch

Natl Exec Board Member

Natl Exec Board Member Dennis H Chookaszian

Natl Exec Board Member

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the compensation from related

and a director/trustee)

organization

organizations

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from the

any hours

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Philip M Condit

Joe Crafton

William F Cronk

Ralph de la Vega

Douglas H Dittrick

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member
John C Cushman III

Natl Exec Board Member
Charles W Dahlguist III

VP-Supply/Natl Exec Board Member

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National Commissioner/Natl Exec Board Member

VP-National Jamboree/Natl Exec Board Member

	ally Hours	""	ı a uıı	ecte		usice	,	Organization	organizations	l montaile .
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Keith A Clark Natl Exec Board Member	0	x						0	0	1
D Kent Clayburn Natl Exec Board Member	1 0	x						0	0	(
Ronald O Coleman Natl Exec Board Member	1 0	×						0	0	ı
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and Independent Contractors (A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related

	week (list any hours	pers		botl ecto	h an or/tr	office ustee		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
John R Donnell Jr Natl Exec Board Member	1 0	×						0	0	0
L B Eckelkamp Jr Natl Exec Board Member	1	×						0	0	0
Thomas C Edwards Natl Exec Board Member (June - Dec 2017)	0	x						0	0	0
Craig E Fenneman Reg Pres-Central Region (June - Dec 2017)/Natl Exec Board Member	1 0	х						0	0	0
Jack D Furst Natl Exec Board Member	1 0	x						0	0	0
Dr Robert M Gates Immediate Past President/Natl Exec Board Member	1	x						0	0	0
E Gorden Gee Natl Exec Board Member	0	х						0	0	0

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Forrest Gertin

Michael T Goodrich

John Gottschalk

Natl Exec Board Member

Natl Exec Board Member (June - Dec 2017)

Natl Exec Board Member (Jan to May 2017)

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organizations from the organization

	any nours	and	a dir	recto	or/tr	ustee,)	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Bradley E Haddock Natl Exec Board Member	0	x						0	0	0	
J Brett Harvey Natl Exec Board Member	0	х						0	0	0	
Aubrey B Harwell Jr Natl Exec Board Member	1	×						0	0	0	

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Michael G Hoffman

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Natl Exec Board Member (Jan to May 2017)

Natl Exec Board Member (June - Dec 2017)

Natl Exec Board Member Jeffrey R Holland

Natl Exec Board Member Raymond E Johns

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member

Hunter N Jones

Joy Jones

Ron Kırk

Lyle R Knight

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average compensation hours per than one box, unless compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organizations from the organization

	any nours	and	a dir	ecto	r/tr'ر	rustee)) !	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	101	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Robert J LaFortune Natl Exec Board Member (Jan to May 2017)	1 0	х						0	0	0	
Joseph P Landy Treasurer/VP-Finance/Natl Exec Board Member	1	х		x				0	0	0	
Fred Markham Natl Exec Board Member	1 0	х						0	0	0	

Treasurer/VP-Finance/Natl Exec Board Member	1	X	х		0	
Fred Markham Natl Exec Board Member	1 0	X			0	
Francis R McAllister Natl Exec Board Member	1	×			0	

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and Independent Contractors

Drayton McLane Jr

Ronald K Migita

Douglas B Mitchell

C David Moody

Jose F Nino

Natl Exec Board Member

Natl Exec Board Member Thomas S Monson

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member (Jan to May 2017)

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(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the compensation from related

and a director/trustee)

organization

organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any nours	""	u un	CCLC) i / Ci	astee	,	Organization	organizations	I morni che	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Arthur F Oppenheimer VP-Human Resources/Natl Exec Board Member	0	х		×				0	0	0	
Stephen W Owen Natl Exec Board Member	0	х						0	0	0	
Dan Ownby International Commissioner/Natl Exec Board Member	0	х		х				0	0	0	
R Doyle Parrish	1										

International Commissioner/Natl Exec Board Member	
R Doyle Parrish	
VP-National Adventures/Natl Exec Board Member	
Tico A Perez	

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VP-Diversity/Natl Exec Board Member

Wavne M Perry

Paul Raines

Natl Exec Board Member Jeanette H Prenger

Natl Exec Board Member

Natl Exec Board Member Frank R Ramirez

Natl Exec Board Member Robert H Reynolds

Natl Exec Board Member

and Independent Contractors

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any hours

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related and a director/trustee)

organization

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any hours

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	1,		1				′	(1)	(14/ 0/4000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
Roy S Roberts Natl Exec Board Member	1 0	х						0	0	0	
James D Rogers Natl Exec Board Member	0	х						0	0	0	
Matthew K Rose VP-Development/Natl Exec Board Member	1	х		х				0	0	0	
Nathan O Rosenberg VP-Operations/Natl Exec Board Member	0	х		x				0	0	0	
	1										

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VP-Operations/Natl Exec Board Member
Jım Ryffel
Natl Exec Board Member
Alison K Schuler

Reg Pres-Northeast Region/Natl Exec Board Member

Natl Exec Board Member (June - Dec 2017)

Reg Pre-Western Region/Natl Exec Board Member

Natl Exec Board Member

Eric Schultz

Michael E Sears

Charles H Smith

Wesley J Smith

Natl Exec Board Member

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation from the

'	any hours	and	a dır	ecto	r/tr'ر	rustee)	, !	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	101	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Scott Sorrels Natl Exec Board Member	1 0	X						0	0	0
William W Stark Jr Natl Exec Board Member	0	Х						0	0	0
Randall L Stephenson President/Natl Exec Board Member	1	X		x				0	0	0
David L Steward VP-Information Delivery/Natl Exec Board Member	0	X		x				0	0	0

Х

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Х

David L Steward
VP-Information Delivery/Natl Exec Board Member
Bradley D Tilden
VP-Marketing/Natl Exec Board Member
Rex W Tillerson

Natl Exec Board Member (Jan to May 2017)

President-Elect/Natl Exec Board Member

VP-Membership/Natl Exec Board Member

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Frank D Tsuru

James S Turley

Pratik Vaidya

Natl Exec Board Member

Natl Exec Board Member
Steven E Weekes

and Independent Contractors

and Independent Contractors (A) Name and Title (C)
Position (do not check more (D) (E) (F) (B) Average Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per

	week (list any hours			ecto	or/tr	office ustee)		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Gary E Wendlandt Natl Exec Board Member	1	х						0	0	0
Brian P Williams Reg Pres-Central Region/Natl Exec Board Member (Jan to May 2017)	1 0	×		х				0	0	0
James S Wilson Natl Exec Board Member	1 0	х						0	0	0
Thomas Yarboro Reg Pres-Southern Region/Natl Exec Board Member	1 0	x		×				0	0	0
Michael B Surbaugh Secretary/Chief Scout Executive	40			×				624,713	0	245,368
Michael A Ashline Chief Financial Officer	40			x				414,508	0	128,407
Steven P McGowan Asst Secretary/General Counsel	40			х				399,650	0	107,942
Mark Logemann	40									

Х

Х

256,181

359,342

324,671

366,217

240,393

48,756

0

Mıchael B Surbaugh	1			Х			624,713					
Secretary/Chief Scout Executive		1						024,713				
Michael A Ashline	40			х			414,508					
Chief Financial Officer	0		++				-++					

40

40

......

Bradley D Farmer

John Green

ACSE Development

ACSE, Natl Dir Support Services

Group Director, Outdoor Adventures

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours from the

organization

280,745

331,777

554,502

250,687

554,771

310,601

organizations

119,065

246,850

23,255

197,210

156,431

202,500

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

					-			(14, 2/1000	(14, 24,000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Todd McGregor Group Director, Summit (June - Dec 2017)	40				×			211,147	0	171,389
Madison Myers Natl Jamboree Director	40				×			154,452	0	131,567
Vıjay Challa Chief Technology Officer	40				×			260,415	0	21,761
Samuel Thompson	40				×			161,076	0	173,117

Х

Х

Х

Х

Х

40

40

40

40

40

40

Chief Technology Officer	
Samuel Thompson	
Group Director, Information Technology	
Mark Winkelman	

Group Director, Supply

ACSE, Director Outdoor Adventures

Director, Office of Philanthropy

Deputy Chief Scout Executive (Jan to May 2017)

Director, Government and Community Relations

Al Lambert

Don McChesney

Perry Cochell

Willie Iles

John Mosby

Regional Director

and Independent Contractors

and Independent Contractors (A) Name and Title

Ron Oats

Lisa Young

Regional Director

Steve Medlicott

Group Director, Human Resources

Group Director, Marketing

hours per week (list any hours for related organizations below dotted line)
40
C
40
С

(B)

Average

................

pers		both	an	nless office ustee)	
Individual trustee	Institutional Trustee	Officer	Key employee	Highest compensated employee	
				х	
				х	
					,

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(C)

Position (do not check more

compen from organiz (W- 2/3 MIS	the ation L099-
	371,105
	263,802
	233,637

(D)

Reportable

Former

(E)

Reportable

compensation

from related

organizations

(W- 2/1099-

MISC)

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

215,454

198,741

156,774

and a di 40

efile	GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493275007068
SCI	lED	ULE A	- Dublic /	Charity Statu	s and Dul	alic Supp	ort	OMB No 1545-0047
	m 990		Complete if the o	rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) c empt charitable 990 or Form 99	organization or trust. 0-EZ.	r a section	2017
•		the Treasury	► Information abou	ut Schedule A (Form www.irs.a	990 or 990-EZ ov/form990.) and its instru	ictions is at	Open to Public Inspection
Name	of th	ne organiza OF AMERICA	tion				Employer identific	ation number
		OF AMERICA					22-1576300	
Pa			for Public Charity State a private foundation because				See instructions.	
1 ne o	rganiz		onvention of churches, or as	•	•	,	(A)(i)	
2		·	scribed in section 170(b)(
3					,	, ,		
			or a cooperative hospital ser	-			-	
4	Ш		esearch organization operat and state	ed in conjunction with	a nospital descri	ped in section :	17U(D)(1)(A)(III). E	nter the nospital's
5		(b)(1)(A)	ation operated for the benefi (iv). (Complete Part II)	-				bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓	section 17	ation that normally receives ' 0(b)(1)(A)(vi). (Complete	Part II)			init or from the gener	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization de ant college of agriculture S					ege or university or a
10		from activit	ation that normally receives lies related to its exempt fur income and unrelated busin see section 509(a)(2). (Co	nctions—subject to cer less taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	ipport from gross
11			ation organized and operated		r public safety S	ee section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	ated, supervised, or coappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ation vested in the sar			- , ,, ,	-
С		Type III f	unctionally integrated. A sorganization(s) (see instruct	supporting organizatio				ted with, its
d		functionally	on-functionally integrate integrated The organization) You must complete Pai	n generally must satis	fy a distribution i	requirement and		
e			box if the organization recei			RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		or Type III non-functionally of supported organizations	integrated supporting	organization			
g			ing information about the si	upported organization(s)		_	
	(i) N	lame of supp organization	, , ,	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			<u> </u>					
Total			tion Act Notice, see the I		Cat No 11285		 	 90 or 990-EZ) 2017

(b)(1)(A)(ix)

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

	III. If the organization fa	ails to qualify un	der the tests list	ed below, pleas	e complete Part	III.)		
S	ection A. Public Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2	:017	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and							
	membership fees received (Do not	61,242,241	86,432,929	77,632,390	82,737,396	83	3,656,244	391,701,200
	include any "unusual grant ")							
_	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities	+		+				
_	furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 3	61,242,241	86,432,929	77,632,390	82,737,396	83	3,656,244	391,701,200
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							9,116,945
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5							382,584,255
	from line 4							302,304,233
	ection B. Total Support Calendar year							
	(or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e) 2	017	(f) Total
7	Amounts from line 4	61,242,241	86,432,929	77,632,390	82,737,396	83	3,656,244	391,701,200
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties	20,215,992	20,745,765	16,839,237	18,122,766	1/	1,374,670	90,298,430
	and income from similar sources	20,213,332	20,743,703	10,033,237	10,122,700	_	1,374,070	30,230,430
9	Net income from unrelated							
	business activities, whether or not the business is regularly carried on							
	and a dominous to your any control of							
10	Other income Do not include gain	272.404	205 207	050.013	1 160 676		724 020	4 742 006
	or loss from the sale of capital assets (Explain in Part VI)	972,481	906,987	968,912	1,160,676		734,830	4,743,886
11	Total support. Add lines 7 through							406 742 546
	10							486,743,516
	Gross receipts from related activities,					12		1,235,393,295
13	First five years. If the Form 990 is for							nızatıon,
	check this box and stop here						<u>▶⊔</u>	
	ection C. Computation of Publi							
	Public support percentage for 2017 (li			olumn (f))		14		78 601 %
	Public support percentage for 2016 Sc					15		76 530 %
16a	33 1/3% support test—2017. If the	e organization did n	ot check the box o	n line 13, and line	e 14 is 33 1/3% or	more, c	neck this b	
	and stop here. The organization qual							▶ ☑
b	33 1/3% support test— 2016. If the	ne organization did	not check a box or	n line 13 or 16a, a	nd line 15 is 33 1/	'3% or m	ore, check	_
	box and stop here. The organization							▶□
17a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organization in Part VI how the organization meets							
	organization	ucis and the		5		, -appc		►□
h	10%-facts-and-circumstances te	st—2016. If the or	ganization did not	check a box on lin	ne 13. 16a. 16b. o	r 17a. ar	nd line	F L
U	15 is 10% or more, and if the organi						· · · · · · · · ·	
	Explain in Part VI how the organization	on meets the "facts	-and-circumstance	s" test. The organ	nization qualifies a	s a publi	cly	

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
ı	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the						
	determination 31						
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use						
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below						
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						

				3.
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Vec " describe in Part VI how the organization had such control and discretion despite heing controlled or			
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	$\overline{}$	
	to the following supported digamization has used exclusively for section 1, 6(6)(E)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in			
	organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a			
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)			

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Oid the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7º If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		
	complete Part 1 of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)		•	-9
	·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
-	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations		l	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	·	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2 a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Schedule A	Page 8 (Form 990 or 990-EZ) 2017		
Part VI	Section A, lines 1, 2, Part IV, Section D, lin	mation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, ib, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, is 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See	
		Facts And Circumstances Test	
990 Sche	dule A, Supplemen	al Information	
Ret	turn Reference	Explanation	

Other miscellaneous income from High Adventure Bases, Regions, and National Eagle Scout Association

Schedule A, Part II, Line 10

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493275007068

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Inspection

f the		e Part I-A only n Form 990, Part IV, Line 4, or Form 9 thave filed Form 5768 (election under s					3
		t have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax					
Pro:	xy Tax) (see separate instruction: Section 501(c)(4), (5), or (6) organiz	s), then	., (555 55pa. ats			_, ,	
Nar	me of the organization	zations Complete Part III		Employer id	lenti	fication num	ber
BOY	SCOUTS OF AMERICA			22-1576300			
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is		niza	ition.	
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political cam	npaign activities in	Part IV (see instruction	s for	definition of	
2	Political campaign activity expend	itures (see instructions)		•	\$		
3	Volunteer hours for political camp	• • •	- 504(-)(2)				
		nization is exempt under sectio					
1 2	· ·	ex incurred by the organization under se ex incurred by organization managers ur			\$		
3		tion 4955 tax, did it file Form 4720 for t		•	₽		□ No
4a	Was a correction made?	·····	,			□ Yes	⊔ No □ No
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3).		
1	·	ed by the filing organization for section	•		\$		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other o	rganızatıons for se	ection 527 exempt	\$		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	line 17b ►	\$		
4	Did the filing organization file For	m 1120-POL for this year?				Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere see (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organization's fun olitical organization, suc	ids A	Also enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds If none, enter -0-		(e) Amount of contributions and prompt directly delived separate programments or contributed and contributed separate programization enter-	received otly and rered to a political If none,
1							
2							
3							
1							
5							
5							
or P	aperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 500845 Schedule	C (Fo	rm 990 or 990)-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017

Return Reference

Schedule C, Part II-A, Line A

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying				(b)	
activii		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?	\longrightarrow			
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				_
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				_
i	Other activities?				_
j	Total Add lines 1c through 1i				_
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				_
	If "Yes," enter the amount of any tax incurred under section 4912		L		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	. 1	L		_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				_
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), or	· section		
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	+	
	tilles Complete if the organization is exempt under section 501(c)(4), section 501(c)	·/=\ 0'	-		1/6
i Cir	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes.")(0
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			_
C	Total	2c			_
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			_
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			_
Pa	art IV Supplemental Information				
	vide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), ructions), and Part II-B, line 1 Also, complete this part for any additional information	Part II-/	A, lines 1 a	and 2 (se	:e

Explanation

Arrow WV, Inc , 27-0441319, 1325 West Walnut Hill Lane, Irving, Texas 75035

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

DLN: 93493275007068 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

▶ Attach to Form 990.

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** BOY SCOUTS OF AMERICA 22-1576300 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

 \boldsymbol{d} Equipment .

Sche	edule D (Form 990) 2017								Page 2
Par	t IIII Organizations M	laintaining Collections o	of Art, His	torical Trea	sures, or Otl	her Similar Ass	ets (cont	tinued)	
3	Using the organization's ac items (check all that apply)	quisition, accession, and other)	records, ch	eck any of the	following that a	are a significant use	e of its co	llection	
а	✓ Public exhibition			d Loa	n or exchange	programs			
b	Scholarly research			e 🗌 Oth	ner				
С	✓ Preservation for future	re generations							
4	Provide a description of the Part XIII	e organization's collections and	explain how	w they further t	he organizatior	n's exempt purpose	: In		
5		ganızatıon solicit or receive do unds rather than to be maintai					☐ Yes	☑ No	D
Pa		stodial Arrangements. rganization answered "Yes	" on Form	990, Part IV,	line 9, or rep	orted an amoun	t on Forr	n 990,	Part
1 a	Is the organization an ager included on Form 990, Part	nt, trustee, custodian or other	ıntermedıar	y for contribution	ons or other ass		□		
	meladea on Form 550, Fare	<i>X</i>				l	☐ Yes	∐ No	D
ь	If "Yes," explain the arranc	gement in Part XIII and comple	ete the follo	wing table		Am	ount		_
С	Beginning balance	'		J	1c			-	_
d	Additions during the year				1d				_
е	Distributions during the year	ar			1e				_
f	Ending balance				1f				-
2a	-	e an amount on Form 990, Par	t X. line 21	for escrow or	 custodial accou	nt liability? [☐ Yes	□ No	-
	-					, ,			D
b		jement in Part XIII Check here							
Pa	rt V Endowment Fur	nds. Complete if the organ							
4.	Regioning of very balance	(a)Currer	,635,644	(b)Prior year 214,398,147	(c)Two years b			Four years	
	Beginning of year balance					<u> </u>	35,411		714,804
	Contributions	22	,587,146 ,653,977	9,216,933		*	71,742		555,415 568,882
	Net investment earnings, ga	ilis, and losses			· '	<u>'</u>			
	Grants or scholarships		698,682	978,159	938	3,480 25,18	32,904		69,126
е	Other expenditures for facilit and programs	:ies	138,941	41,516,874	30,327	7,913	o		0
f	Administrative expenses .		141,732	147,646	1,523	3,189 97	2,186	1,5	13,392
g	End of year balance	216	,897,412	181,635,644	214,410),787 256,27	8,088	276,8	356,583
2	Provide the estimated perc	entage of the current year end	balance (lı	ne 1a, column i	(a)) held as	'			
а	Board designated or quasi-	-	•	3,	. ,,				
ь	Permanent endowment >	83 57 %							
c	Temporarily restricted endo								
·	•	a, 2b, and 2c should equal 100	7 %						
3а	· =	s not in the possession of the		that are held a	and administere	ed for the		Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii)) Yes	
b		elated organizations listed as r					3b	Yes	
4		tended uses of the organizatio	n's endowm	ent funds					
Pa		, and Equipment.	U F	000 D+ T/	line 11 - C	. Farma 000 D	. V . L		
	Description of property	rganization answered "Yes (a) Cost or other basis		990, Part IV, other basis (other		ted depreciation		LO. Book value	<u> </u>
	Description of property	(investment)	(2) 2030 01	24313 (001161	, Connectantale	asp. sciation	(4)	value	-
1-	Land	0		18,729,19	91			1.9	,729,191
	Land	0		102,490,29		55,779,554			,710,743
	Buildings	0		195,02		153,745			41,282
C	Leasehold improvements	I	I	193,02	·′	133,743			71,202

0

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

113,037,785

37,164,036

102,645,252

75,873,749

Part VII Investments—Other Securities. Complete if	the organization answ	ered "Yes" on Form 9	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value		hod of valuation
(including name of security) (1) Financial derivatives		Cost or end-	of-year market value
(2) Closely-held equity interests			
(3) Other(A) BSA Commingled Endowment Fund LP	351,494,161		F
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	254 404 464		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	351,494,161		
Complete if the organization answered 'Yes' on			
(a) Description of investment	(b) Book value		hod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	b San San San San San San San San San San	+ T/ los - 44 d. Coo Form	- 000 Part V los - 45
Part IX Other Assets. Complete if the organization answers (a) Description	ed Tes OffForm 990, Far	tiv, iiie iiu See Foiii	(b) Book value
(1) INTERCOMPANY RECEIVABLE (2) GIFT ANNUITY AND OTHER ASSETS			330,036,010 10,398,888
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization	answered 'Yes' on For	m 990, Part IV, line	▶ 340,434,898 11e or 11f.
See Form 990, Part X, line 25.		ook value	
1. (a) Description of Hability (1) Federal income taxes	(6) 50	0	
Insurance Reserves		189,673,581	
Gift Annuity Liability (3)		8,046,784	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
		107 720 365	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text	of the footnote to the org	197,720,365 ganızatıon's financıal sta	tements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC	740) Check here if the f	text of the footnote has	been provided in Part XIII 💆

Schedule D (Form 990) 2017

Part XI

а

1

44.547.791

Page 4

44,547,791 242,560,209

24,093,054

266,653,263

283,604,000

283,604,000

24,096,980

307,700,980

Schedule D (Form 990) 2017

_	, ida imies za cinoagi. za i i i i i i i i i i i i i i i i i i
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not
а	Investment expenses not included on Form 990, Part VIII
b	Other (Describe in Part XIII)
С	Add lines 4a and 4b
5	Total revenue Add lines 3 and 4c. (This must equal Form
Par	Reconciliation of Expenses per Audited Complete if the organization answered 'Yes'
1	Total expenses and losses per audited financial statement
2	Amounts included on line 1 but not on Form 990, Part IX,
а	Donated services and use of facilities
b	Prior year adjustments
С	Other losses
d	Other (Describe in Part XIII)
е	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part IX, line 25, but not o

See Additional Data Table

Net unrealized gains (losses) on investments	2a
Donated services and use of facilities	2b
Recoveries of prior year grants	2c
Other (Describe in Part XIII)	2d
Add lines 2a through 2d	
Subtract line 2e from line 1	
Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$	
Investment expenses not included on Form 990, Part VIII, line 7b .	4a
Other (Describe in Part XIII)	4b
Add lines 4a and 4b	
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Ex
Complete if the organization answered 'Yes' on Form 990, Part	
Complete if the organization answered 'Yes' on Form 990, Part	
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	: IV, line 12a.
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2a
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2b
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2b 2c
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2b 2c
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2b 2c
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	2a 2b 2c
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

a	Net unrealized gains (losses) on i	nivestinents	Za	44,547,79	1	
b	Donated services and use of facil	ities	2b		0	
c	Recoveries of prior year grants		2c		0	
d	Other (Describe in Part XIII) .		. 2d		0	
е	Add lines 2a through 2d				2e	44,547,79
3	Subtract line 2e from line 1 .				3	242,560,20
4	Amounts included on Form 990, I	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a		О	
b	Other (Describe in Part XIII) .		4b	24,093,05	4	
c	Add lines 4a and 4b				4c	24,093,05
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line	12).		5	266,653,26
Par		penses per Audited Financial Stat Ization answered 'Yes' on Form 990,			Return.	
1	Total expenses and losses per au	dited financial statements			1	283,604,00
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25				
а	Donated services and use of facil	ities	2a		0	
b	Prior year adjustments		2b		0	
С	Other losses		2c		0	
d	Other (Describe in Part XIII) .		. 2d		0	
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	283,604,00
4	Amounts included on Form 990, i	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 🔒 🔒	4a		0	
b	Other (Describe in Part XIII) .		. 4b	24,096,98	0	
c	Add lines 4a and 4b				4c	24,096,98
5	Total expenses Add lines 3 and 4	4c. (This must equal Form 990, Part I, line	e 18) .		5	307,700,98
Pa	rt XIII Supplemental Info	ormation				
		lart II, lines 3, 5, and 9, Part III, lines 1a a s 2d and 4b Also complete this part to pro			rt V, line 4,	, Part X, line 2, Part
	Return Reference		E×	planation		
<u></u>	Additional Data Table					

Page 5		Part XIII Supplemental Information (continued)		
	ormation (continued)			
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software ID: 17005980

Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 1	Collections The National Scouting Museum in Irving, Texas, possesses artifacts, fine art, and multimedia archives last appraised in November 2017 at approximately \$80,000,000. The museum also houses collections of Scouting memorabilia, objects, and archival documents. In conformity with accounting policy generally followed by museums, these collections are not recognized as assets in the Consolidated Statement of Financial Position, however, cos to associated with insuring and maintaining these collections have been expensed. During 2.017, no major additions or disposals of collections items occurred. In 2017, the National Scouting Museum located in Irving, Texas closed and relocated to Philmont Scout Ranch in Comparing New Mexico.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 4	Extensive collection of Scout memorabilia and Rockwell paintings reflecting Boy Scouts in daily life are on display for the enjoyment of members, volunteers, and visitors. Encouraging boys to explore the many facets of Scouting.

Sι

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4	Endowments consist of approximately 112 individual funds established for a variety of purp oses. The endowment includes both donor-restricted endowment funds and funds designated by the Executive Board to function as endowments. Net assets associated with endowment funds, including funds designate by the Executive Board to function as endowments, are classified and reported based upon the existence or absence of donor-imposed restrictions or in accordance with the Executive Board's interpretation of relevant law

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	Uncertainty in Income Taxes The National Council recognizes interest and penalties relate d to underpayment of income taxes as income tax expense. As of December 31, 2017, the National Council had not recorded any amounts related to unrecognized income tax benefits or a ccrued interest and penalties. The National Council does not anticipate any significant changes to unrecognized income tax benefits over the next year.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4b	A consolidated audit of the Boy Scouts of America and related organizations financial stat ements was completed for the year ending December 31, 2017 The audited revenues include L earning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional t rust revenues and reclassification of expenses netted to income are eliminated for reporting purposes.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4b	A consolidated audit of the Boy Scouts of America and related organizations financial stat ements was completed for the year ending December 31, 2017. The audited revenues include L earning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional t rust revenues and reclassification of expenses netted to income are eliminated for reporting purposes.

efile GRAPHIC prin	t - DO NOT F	PROCESS	As Filed Data			DLN:	93493275007068	
SCHEDULE F (Form 990)	State	ement of	Activities (Outside the United States OMB No. 1545-0047				
(1 31111 333)	► Compl	lete if the organ		res" to Form 990, Part IV, I to Form 990.	ıne 14b, 15	, or 16.	2017	
Department of the Treasury Internal Revenue Service	▶ Informa	tion about Sche	dule F (Form 990)	and its instructions is at wi	vw.irs.gov/	form990.	Open to Public Inspection	
Name of the organization						Employer iden	tification number	
BOY SCOUTS OF AMERIC	.A					22-1576300		
	Information , Part IV, line		s Outside the l	Jnited States. Comple	te if the o	organization a	nswered "Yes" to	
other assistance, to award the grai	the grantees' nts or assistances. Describe in	eligibility for t	he grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria u	sed	☑ Yes □ No ner assistance	
3 Activites per Region	n (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	program s spec	ry listed in (d) is a ervice, describe fic type of (s) in region	(f) Total expenditures for and investments in region	
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continua Part I c Totals (add lines 3			2 4				13,535,736	
For Paperwork Reduction		the Instruction	ns for Form 990.	Cat	No 50082	W Schedul	e F (Form 990) 2017	

Page 2

organization	section and EIN (if		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV,
	applicable)							appraisal, other)
(1)		Europe (including	Support International	197,825	wire transfer	0		

[Iceland and Greenland) Scouting (2) Central America and Support International 19.812 wire transfers

Schedule F (Form 990) 2017

the Caribbean Scouting (3)

3)		Support International Scouting	65,000	wire transfers	0	
4)	·				·	

		Scouting			
(4)					

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

(16) (17) (18) Page **3**

Schedule F (Form 990) 2017

Part III can be o	duplicated if addition	<u>onal space is n</u>	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							

(4)				
(5)				
(6)				
(7)				
(8)				

(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(12)	<u> </u>	, and the second	, and the second	, and the second	· ·	

(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				

Sche	dule F (Form 990) 2017		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	☑ No

Schedule F (F	orm 9	990) 2017 Page 5
	Prov amo meth	plemental Information ide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; unts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide additional information (see instructions).
Return Reference		Explanation
Schedule F Part I. Line	' I	The organization has an established relationship with the existing world Scouting organizations that are given grants. These specific organizations are supported due to their effectiveness and legitimacy with program documentation and finances. The

organization is in contact with these organizations regularly to follow up on projects and ensure compliance

Additional Data

South America

Software ID: 17005980 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Support International

Scouting

113,925

Eaum	000 6	chodula	E Dout I	Activitio	a Dutaida	The United	Ctatac

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (including Iceland and Greenland)	0	0	_	Support International Scouting	231,225

0 Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the 0 |Grantmaking Support International 100.212 Carıbbean Scouting Central America and the Investment of pension 884.298 0 Investments Carıbbean lfunds

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and 0 linvestments Investment of pension 1.520.420 Greenland) lfunds South America 0 | Program Services 1.876 Interamerican Scout Summit

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the Bahama Sea Base visit and 2.930 0 Program Services Caribbean Interamerican Region Meetina Europe (including Iceland and 0 Program Services World Scouting meetings 85.360 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Russia and the newly 0 Program Services World Scout Conference 24,431 independent States Fast Asia and the Pacific 87.307 0 Program Services Reviewing supply vendor lfactories

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 505.298 North America (including Program Services Northern Tier High Canada and Mexico, but not Adventure Bases the United States) Central America and the 0 Investments Book Value of investment 6,835,413 Caribbean lın reaion

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and Book Value of Investments 2.999.999 0 IInvestments Greenland) lin region North America (including 0 |Grantmaking Support International 11.925 Canada and Mexico, but not Scouting the United States)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Russia and the newly 0 |Grantmaking Support International 5.650 independent States Scouting Middle East and North Africa 0 |Grantmaking Support International 22.742 Scoutina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 0 |Grantmaking Support International 52.100 Scouting Fast Asia and the Pacific 0 |Grantmaking Support International 48.125 Scoutina

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) South Asia 0 |Grantmaking |Support International 2.500 Scouting

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) Jamboree 5,650 wire transfer Russia and the Scholarship Inewiv lindependent States Jamboree 66 80.400 wire transfer Central America Scholarship land the Carıbbean

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) Jamboree 39 48,125 wire transfer East Asia and Scholarship the Pacific Jamboree 28 33,400 wire transfer lEurope Scholarship l(ıncludına Iceland and Greenland)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (g) Description of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Jamboree 20 22,742 wire transfer Middle East and Scholarship North Africa Jamboree 10 11.925 wire transfer North America Scholarship (ıncludına Canada and Mexico, but not the United (States)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Jamboree 41 48.925 wire transfer South America Scholarship Jamboree 43 52.100 wire transfer Sub-Saharan Scholarship Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (b) Region (a) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Jamboree 2,500 wire transfer South Asia Scholarship

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990.

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

OMB No 1545-0047

DLN: 93493275007068

Open to Public Inspection

Employer identification number

Name of the organization BOY SCOUTS OF AMERICA

Department of the Treasury

Internal Revenue Service

9

10

Total

(Form 990 or 990-EZ)

SCHEDULE G

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations e ✓ Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Ves □ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did (i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Employee AGC & America's Charities Federated 14150 Newbrook Dr Campaigns Yes 172,011 43,247 128,764 Suite 110 Chantilly, VA 20151 Donated vehicle Automotive Recovery Services auction program Two Westbrook Corporate Yes 222,723 68,442 154,281 Center Suite 500 Westchester, IL 60154 8

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, PR, RI, SC, TN, UT, VA, WA, WI, WV

394,734

283,045

111,689

		(a)Event #1	(b) Event #2	(c)Other events	(d)
KIE		Tarpon Fishing Tournament (event type)	Wilderness Fishing Tournament (event type)	1(total number)	Total events (add col (a) through col (c))
Keverkie	1 Gross receipts	137,500	108,125	21,204	266,82
	2 Less Contributions	63,600	66,658		,
	3 Gross income (line 1 minus line 2)	73,900	41,467	8,839	
	4 Cash prizes	0	0		
	5 Noncash prizes	1,993	240	1,365	3,59
126 126	6 Rent/facility costs	14,160	51,467	6,831	72,45
<u>}</u>	7 Food and beverages	3,092	221	3,373	6,68
Direct Expenses	8 Entertainment	300	0	0	30
֡֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	9 Other direct expenses	35,724	4,498	0	40,22
1	10 Direct expense summary Add lines 4	123,26			
	11 Net income summary Subtract line 10	94			
Par	Gaming. Complete if the org on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000
жеуегиле		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
왕	1 Gross revenue				
242	2 Cash prizes				
[출	3 Noncash prizes				
	4 Rent/facility costs				
2					
\dashv	5 Other direct expenses	☐ Yes %	☐ Yes %	☐ Yes %	
	6 Volunteer labor	□ No	□ No	□ No	
	7 Direct expense summary Add lines 2				
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)		
a b	Enter the state(s) in which the organization licensed to conduct g If "No," explain	☐ Yes ☐ No			
		e tax year?			

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page 3
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entit	ΣY	□Yes	□No	
13	Indicate the percentage of gaming acti	vity conducted in				
а	The organization's facility		13	а		%
b	An outside facility		13	ь		%
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books	and record	s		
	Name ►					
	Address •					
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No	
Ь		evenue received by the organization ► \$ a the third party ► \$	and the			
c	If "Yes," enter name and address of the	e third party				
	Name •					
	Address ►					
16	Gaming manager information					
	Name ►					
	Gaming manager compensation ▶ \$	······································				
	Description of services provided ►					
	☐ Director/officer	☐ Employee ☐ Independent contractor				
17	Mandatory distributions					
а	Is the organization required under state retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to)	□Yes	Пио	
b	Enter the amount of distributions requing the organization's own exempt activities.	red under state law distributed to other exempt organizations or spities during the tax year > \$	pent	63		
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).
	Return Reference	Explanation				

Schedule G (Form 990 or 990-EZ) 2017

Grants and Unifer Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Information about Schedule I (Form 990) and its instructions is at www.frs.gov/form990 . Implement of the organization on Grants and Assistance	efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DL	N: 934932750	07068
Part I General Information on Grants and Assistance Description Part IV Replace Part IV Schedule I (Form 990) Department of the Treasury	Co		2017 Open to Public							
Part General Information on Grants and Assistance	Name of the organization						Emplo	yer ıdentıfic	ation number	
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part IV the organization's procedure for monitoring the use of grant funds in the United States Part IV the organization's procedure for monitoring the use of grant funds in the United States Part IV the organization's procedure for monitoring the use of grant funds in the United States Part IV the organization's procedure for monitoring the use of grant funds in the United States Part IV the organization's procedure for monitoring the use of grant funds in the United States Part IV the organization of grant funds in the United States							22-15	76300		
that received more two \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant (c) Amount of cash assistance (c) Method of valuation (book, FMV, appraisal, other) (b) EIN (g) Description of noncash assistance (c) Amount of noncash assistance (d) Amount of noncash assistance (e) Amount of noncash assistance (d) Method of valuation (book, FMV, appraisal, other) (d) EIN (g) Description of noncash assistance (e) Amount of noncash assistance (f) Purpose of grant (h) Purpose of gra	 Does the organization main the selection criteria used Describe in Part IV the org 	ntain records to sub to award the grants anization's procedui	stantiate the amount of or assistance? res for monitoring the u	se of grant funds in the U	nited States			Part IV line		
20	that received more (a) Name and address of organization	than \$5,000 Part II	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal,	(g) Descri	ption of	(h) Purpose o	
20	(1) See Addıtıonal Data									
	(2)									
5)	(3)									
5)	(4)									
2)	(5)									
3)	(6)									
2) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(7)									
.0)	(8)									
2.2) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(9)									
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(10)									
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(11)									
	(12)									
or Paperwork Reduction Act Notice, see the Instructions for Form 990.	3 Enter total number of other	r organizations liste	d in the line 1 table .					. •		0

Schedule I (Form 990) 2017

Additional Data

Anthony Wayne Area Council

8315 W Jefferson Blvd

Fort Wayne, IN 46808 Baltimore Area Council 220

701 Wyman Park Drive

Baltimore, MD 212112805

157

Software ID: 17005980 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

16,000

8,354

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a)

501 (c) 3

501 (c) 3

) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	

(h) Purpose of grant or assistance

Grants to Scouting

Grants to Scouting

related 501c3

related 501c3

corporations

corporations

(q) Description of

non-cash assistance

35-0876343

52-0591572

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance

related 501c3

corporations

Buffalo Trace Council 156 3501 E Lloyd Expressway Evansville, IN 47715	35-0867971	501 (c) 3	16,000	0		Grants to Scouting related 501c3 corporations
Cherokee Area Council 469	73-0592381	501 (c) 3	5,807	0		Grants to Scouting

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

520 South Quapaw Avenue Bartlesville, OK 74003

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

corporations

Chippewa Valley Council 637 710 S Hastings Way Eau Claire, WI 54701	39-0807227	501 (c) 3	6,000	0		Grants to Scouting related 501c3 corporations

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Dallas, TX 752350726

501c3 ations Circle Ten Council 571 75-0800615 501 (c) 3 12,169 Grants to Scouting related 501c3 P O Box 35726

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Crossroads Of America Council 35-0867962 501 (c) 3 21,660 Grants to Scouting

related 501c3

corporations

160 7125 Fall Creek Rd North Indianapolis, IN 46256						related 501c3 corporations
Great Southwest Council 412	85-0102305	501 (c) 3	19,913	0		Grants to Scouting

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5841 Office Blvd NE

Albuquerque, NM 871095820

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 44-0545995 501 (c) 3 5.705 Heart Of America Council Grants to Scouting

10210 Holmes Road related 501c3 Kansas City, MO 641314212 corporations Illowa Council 133 36-2616917 501 (c) 3 7.486

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Grants to Scouting 4412 NFundraising Brady related 501c3 Street corporations Davenport, IA 528064009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Indian Nations Council 488 73-0579230 501 (c) 3 9,940 Grants to Scouting

related 501c3

corporations

4295 SFundraising Garnett Road Tulsa, OK 74146						corporations
Laurel Highlands Council 527	25-0965214	501 (c) 3	7,730	0		Grants to Scouting

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Flag Plaza 1275 Bedford Ave

Pittsburgh, PA 152193699

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Middle Tennessee Council 560 62-0477729 501 (c) 3 18 698 Grants to Scouting

corporations

3414 Hillsboro Pike Nashville, TN 37215	02-04///29	301 (0) 3	10,090	0		related 501c3 corporations
National Capital Area Council 82	53-0204610	501 (c) 3	23,628	0		Grants to Scouting related 501c3

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

9190 Rockville Pike

Bethesda, MD 20814

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 56-0529984 501 (c) 3 19.547 Occoneechee Council 421 Grants to Scouting 3231 Atlantic Avenue related 501c3 corporations

3231 Atlantic Avenue
Raleigh, NC 27604

Old Hickory Council 427 56-0529985 501 (c) 3 15,000 0

Grants to Scouting related 501c3
Winston Salem, NC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

271065058

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ts to Scoutina

corporations

Ozark Trails Council 306 1616 South Eastgate Avenue Springfield, MO 658092116	44-0546294	501 (c) 3	12,500	0		related corpora
Patriots Path Council	22-3661431	501 (c) 3	5 204	0		Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Cedar Knolls, NJ 07927

ed 501c3 rations Grants to Scouting J,207 1 Saddle Road related 501c3

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-7147508 501 (c) 3 5.061 Ouivira Council 198 Grants to Scouting related 501c3

3247 NFundraising Oliver
Wichita, KS 67220

San Francisco Bay Area Council 94-1568616
28
1001 Davis Street

related 501c3
corporations

0
Grants to Scouting related 501c3
corporations

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

San Leandro, CA 94577

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

54-0505875 501 (c) 3 15.033 Tidewater Council 596 Grants to Scouting

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1032 Heatherwood Dr related 501c3 Virginia Beach, VA 234556675 corporations

National Eagle Scout Association Scholarship

National Jewish Committee on Scouting
Scholarship

7

6,500

7

6,500

8

FMV, appraisal, other)

(d)Amount of

(e)Method of valuation (book,

(f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b) Number of

781

1394

(c)Amount of

10,000

294,607

764.880

(a)Type of grant or assistance

Doerr Scholarship

Waite Phillips Scholarship

Jamboree Scholarship

(a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance FMV, appraisal, other) recipients cash grant non-cash assistance Josh Carn Manageral Cabalarahin 70 000

Josh Sain Memorial Scholarship	13	79,800	O	
Cooke Eagle Scholarship	86	247,732	0	

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Brinton Environmental Scholarship

Cooke Edgic Scholarship			•	
STEM Scholarship	6	43,062	0	

34,180

STEM Scholarship	6	43,062	0	
'		,		

Kiefer Scholarship	7	6,500	0	

(a)Type of grant or assistance
(b)Number of recipients
(c)Amount of non-cash assistance
(d)Amount of non-cash assistance
(e)Method of valuation (book, FMV, appraisal, other)
(f)Description of non-cash assistance

Palmer Scholarship	3	7,500	0	

23,962

88.165

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

788

Philmont Scholarship

Other Scholarships

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9349327										
Sch	edule J	Co	ompensat	ion Information	ОМ	B No	1545-0)047		
(For	n 990)	For certain Office	ers, Directors, 1	Trustees, Key Employees, and Hig	hest					
		Complete if the ord		ated Employees vered "Yes" on Form 990, Part IV	. line 23.	20	17	7		
		-	► Attach	h to Form 990.						
	tment of the Treasury al Revenue Service	► Information al		J (Form 990) and its instructions agov/form990.	is at		to Pul ectio			
Nar	ne of the organiza				Employer identificat					
BOY	SCOUTS OF AMERIC	_A			22-1576300					
Pa	rt I Questi	ons Regarding Compensa	tion							
							Yes	No		
1a				of the following to or for a person liste my relevant information regarding the						
		or charter travel	$ \mathbf{\nabla}$	Housing allowance or residence for	personal use					
		companions		Payments for business use of perso						
		nification and gross-up payment	s 🔽	Health or social club dues or initiation						
	☐ Discretion	ary spending account		Personal services (e g , maid, chauf	rreur, cher)					
b		kes in line 1a are checked, did t Il of the expenses described abo		follow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1 b	Yes			
2				or allowing expenses incurred by all	4.3	2	Yes			
	directors, truste	es, officers, including the CEO/E	executive Directo	or, regarding the items checked in line	e la/					
3				ed to establish the compensation of t	he					
				not check any boxes for methods CEO/Executive Director, but explain	ın Part III					
		_								
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study						
		of other organizations	7	Approval by the board or compensa	ition committee					
		-	_							
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a					
а	Receive a sever	ance payment or change-of-con	trol payment?			4a	Yes			
b	Participate in, o	receive payment from, a suppl	emental nonqual	lified retirement plan?		4b	Yes			
С	•	receive payment from, an equ		-		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	plicable amounts for each item in Par	t III					
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.						
5	For persons liste		n A, line 1a, did	the organization pay or accrue any						
а	The organization					5a	Yes			
b	Any related orga					5b		No		
	If "Yes," on line	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section Contingent on the net earnings of		the organization pay or accrue any						
а	The organization	۶				6 a		No		
b	Any related orga	anization?				6b		No		
	•	6a or 6b, describe in Part III								
7	For persons liste payments not d	ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Yes	n A, line 1a, did s," describe in Pa	the organization provide any nonfixe art III	d	7		No		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	c				
9		3, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section			No_		
For I	Danamuark Badı	ction Act Notice, see the Ins	tructions for E	orm 990	50053T Schedule 1		. 000)	2017		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report of	compensation fro	m the organization	on row (1) and fro	m related organiza	tions described i	n the	
instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total							
(A) Name and Title	(B) Break	kdown of W-2 and/c compensation	or 1099-MISC	(C) Retirement and other deferred	(D) Nontaxable benefits	columns	(F) Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
	-						

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Schedule J. Part I. Line 1a Employees who travel extensively are allowed to join Airline Travel Clubs Payment for airline travel clubs totaled \$4,000. Airline travel club fees were reimbursed to

Page 3

Schedule J (Form 990) 2017

employees and not included in employee compensation only if a substantial business purpose was provided. The Boy Scouts of America is a family oriented organization and requires spousal participation for events in which the spouse's participation is critical to furthering the programs and mission of the Boy Scouts of America Their expenses are considered necessary to fulfill the business purpose of the organization. As such, total expenses for spousal travel during 2017 were \$21,802, were not included in the employee's taxable compensation and were only reimbursed to the employee upon substantiation and submission of a business purpose The Boy Scouts of America policy allows employees traveling with volunteers to upgrade to first/business class to allow the employee to discuss business during the flight. Also employees traveling extensively for philanthropic efforts are allowed to travel first/business class when potential or current donors are in first/business class to allow continued fundraising efforts. In addition, first/business class is allowed for certain employees that are required to travel extensively

and also require special accommodations. The total first class travel for 2017 was \$56.662 and was not included in employee's taxable compensation and were only reimbursed to the employees upon substantiation and submission of a business purpose as to why first/business class accommodations were needed. The Chief Scout Executive is reimbursed for club dues at the LaCima Club which is used for meeting with potential donors, volunteers and offsite meetings. These expense reimbursements are not included in taxable employee compensation. The total of the LaCima expense in 2017 was \$2,819. Participants in the non qualified retirement restoration plan have the taxable portion grossed-up to cover the taxes The BSA's National Executive Board approved a non-qualified Retirement Benefits Restoration Plan for the benefit of all employees whose benefits would otherwise be limited by the Omnibus Budget Reconciliation Act of 1993 Benefits attributed under the Restoration Plan supplement those accrued under the qualified Retirement Plan and payments do not commence until an employee's retirement. Participants include employees with compensation over \$270,000. Michael

Schedule J, Part I, Line 4

Surbaugh \$89,081 restoration plan, Michael A Ashline \$11,848 restoration plan, John Green \$8,921 restoration plan, Steve McGowan \$8,937 restoration plan, Bradley Farmer \$3,911 restoration plan, Don McChesney \$54,825 restoration plan, Al Lambert \$6,327 restoration plan, Willie Iles \$42,776 restoration plan, John Mosby \$2,727 restoration plan and Ron Oats \$29,954 restoration plan. Don McChesney retired after 36 years of service in 2017 - the change of control payment

Schedule J (Form 990) 2017

Supplemental Information

Part III

(unused vacation and severance) was \$192,000 and his calculated restoration plan benefit were higher because of retirement. Willie Illes retired after 46 years of service in 2017 - the change of control payment (unused vacation and severance) was \$169,725 and his calculated restoration plan benefit were higher because of Iretirement

Schedule J, Part I, Line 5 An Annual Incentive Plan was adopted with a component of compensation based on items such as membership, obtaining funding commitments, maintaining operations within budget, and achieving goals within the organization's strategic plan

Software ID: 17005980 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

A Part of the	Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
Part Part	(A) Name and Title			of W-2 and/or 1099-MISC	Compensation	(C) Retirement and		(E) Total of columns					
Secretary of Scientes ()			(i) Base Compensation	Bonus & incentive	Other reportable		benefits	(B)(ı)-(D)	reported as deferred on				
Secret Ambient 10 340,022 41,234 33,245 110,216 21,635 546,355 0 0 0 0 0 0 0 0 0	Secretary/Chief Scout	l	356,456 0	84,712 	183,545	221,605	27,609	873,927	0				
Server Net Net Net Net Net Net Net Net Net Net			340,029	41,234	33,245	110,218	21,629	546,355	0				
ABST SECREPONYCRICATION CONTRACTOR CONTRACTO			0	0	0	0	0	0	0				
Section Permit Act Permit Permit Act Permit Permit Act Permit Act Permit Act Permit	Asst Secretary/General	l	331,489	45,986 	22,175	80,713	31,539	511,902	0				
ACSE Development:	3Bradley D Farmer	' '	302.766	21 911	24.765	215 421	29 111	602.974	0				
Stroke Discrete, Outstoor Acceptance Company Com		l	0		24,703	213,421	20,111	002,874					
Stock (No. September 1977 1978 1978 1979	Group Director, Outdoor	(1)	207,774	7,000	109,897	24,067	30,392	379,130	0				
Cough Develor () Summit Cough Develor () Coug		(11)	0	0	0	0	0	0	0				
Next Semiconformation Next Ne	Group Director, Summit	(I)	203,761	0	7,386	153,152 	19,912	384,211	0				
Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Officer Chef Technology Chef Technology Officer		(1)	151,973	0	2,479	123,929	8,515	286,896	0				
Chef Technology (I) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	nad sampored birector	(11)	0	0	0	0	0	0	0				
Semula Thompson	7 Vıjay Challa Chief Technology Officer	(1)	248,593	10,000	1,822	9,138	14,193	283,746	0				
Stroup Director, Information Community Relations Community R			0	0	0	0	0	0	0				
Composition Composition	Group Director, Information	(I) (II)	142,040 	0	19,036	152,230	22,409	335,715	0				
Component Comp		(1)	250,371	15,000	15,374	98,718	25,193	404,656	0				
ACSE, Director Outdoor Adventures (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	0	0	0				
1Don McChesney 10 222,646 187,984 143,872 11,108 15,285 580,895 0 0 0 0 0 0 0 0 0	ACSE, Director Outdoor	l	286,387	20,013	25,377 	215,143	34,746	581,666	0				
Depty Chef Scott Care Ca		· ·	222.646	0	0	0	0	0	0				
Director, Office of Philanthropy	Danuty Chief Court	1 ` ′		187,984 	143,872 	11,108 	15,285 	580,895 	0				
13Willie Iles 1280,774 0 273,997 129,117 32,818 716,706 0 0 0 0 0 0 0 0 0	Director, Office of	(1)	229,970	0	20,717	166,368	33,925	450,980	0				
Community Relations		(11)	0	0	0	0	0	0	0				
14John Mosby Regional Director	Director, Government and	` ′	280,774 0	0	273,997	129,117	32,818	716,706					
15Ron Oats Regional Director (1)			260,017	34,361	16,222	176,757	27,897	515,254	0				
Regional Director (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	0	0	0				
16Lisa Young Group Director, Human Resources		l	289,736	17,141	64,228 	201,425 	17,036	589,566	0				
Resources			255,506	0	0 8,296	0 186,708	0 14,590	465,100					
ACSE, Nati Dir Support Services (II) 0 0 0 0 0 0 0 0 0 0 0 0 0	Resources		0	0	0	0	0	0	0				
18Steve Medilicott Group Director, Marketing (I) 228,147 0 5,490 135,083 23,563 392,283 0	ACSE, Natl Dir Support		247,992 0		1,189	334,997	33,838	625,016					
		_	228,147		5,490	135,083	23,563	392,283					
	,,	(11)	0	0	0	0	0	0	0				

efile GRAPH	IC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	93493	27500	7068
Schedule I (Form 990		Su	ıpplemental l	nformation o	n Tax-E	Exem	pt E	Bonds				ОМВ	No 154	5-0047	
(101111990	''	► Complete if t		wered "Yes" to Form , and any additional i				Provide des	criptions,			2	4U 1	. /	
Department of the Internal Revenue S		▶Information	·	► Attach to Form 990 ((Form 990) and its) .			irs.gov/forı	<u>n990</u> .				en to P Inspect		
Name of the organi BOY SCOUTS OF										Emplo	yer iden	tıficatıo	n numbe	er	
	AMERICA									22-1	576300				
Part I Bo	ond Issues														
(a) I	ssuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price		(f) Description	on of purpose	(g) D	(g) Defeased		(h) On behalf of issuer		Pool ncing
										Yes	No	Yes	No	Yes	No
A The County Fayette Cou	Commission of unty (WV)	55-6000314		11-05-2010	50,0	000,000	Sumn		equipping of th amily National	e	X		X		X
B County Cor County (WV	nmission of Fayette /)	55-6000314		03-09-2012	175,0	000,000	Sumn		equipping of th amily National	е	X		Х		X
Part II Pr	oceeds	ı		<u> </u>			ı			·	1				
						A		E	}	(С			D	
						7,014	1,470		19,499,174						
							0		0						
					50,000,000			:	175,000,000						
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							0		0						
							0		0						
						50,000	0,000	:	175,000,000						
	nt proceeds						0		0						
	pent proceeds						0		0						
13 Year of su	ibstantial completion .					013		20		V	N-				NI -
14 Were the	bonds issued as part o	of a current refundir	ig issue?		Yes	No X		Yes	No X	Yes	No		Yes		No
	<u>'</u>		ding issue?			X			X						
	<u> </u>				X	^		×	^						
17 Does the								×							
					Х			^							
Part IIII Pr	ivate Business Us	<u>e</u>				Α		E			<u> </u>			D	
					Yes	A No	,	Yes	No	Yes	No		Yes		No No
1 Was the o	organization a partner i by tax-exempt bonds?	in a partnership, or	a member of an LLC,	which owned property		×		. 30	X						
2 Are there property?	any lease arrangemer	its that may result i	n private business use	of bond-financed	Х			X							
For Danerwork	Doduction Act Notic	e see the Instru	tions for Form 990			t No 5	01025					chadul	o V (Eo	rm 990	1 2017

9

c

Part IV

Arbitrage

Page 2

0 %

0 %

0 %

Χ

No

Χ

Χ

Χ

Х

Х

Χ

Yes

Χ

Χ

Χ

No

Х

Χ

Χ

Х

0 %

0 %

0 %

C

No

Yes

Schedule K (Form 990) 2017

No

Χ

Х

Yes

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed Х Χ property?......... If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

organization, or a state or local government

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

No rebate due?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government

Α

Yes

Χ

Χ

Page 3

No

D

No

Yes

Schedule K (Form 990) 2017

period?

Part V

Part VI

County (WV)

Return Reference

Schedule K, Part IV, Line 2c-11/05/2010 50,000,000 The

County Commission of Fayette

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

			4	
		Yes	No	
a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х	

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

No Arbitrage was incurred, therefore there is no Arbitrage Rebate

Yes

Α

No

Yes

Χ

Х

Χ

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Explanation

No

Х

Χ

Yes

Χ

R

No

Yes

No

C

No

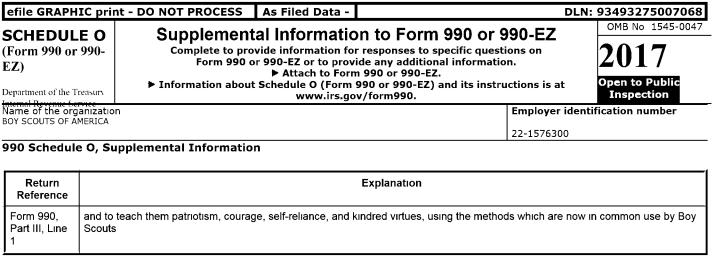
Yes

Yes

Return Reference	Explanation
Schedule K, Part IV, Line 2c- 03/09/2012 175,000,000 County Commission of Fayette County (WV)	No Arbitrage was incurred, therefore there is no Arbitrage Rebate

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493275007068 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2017 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** BOY SCOUTS OF AMERICA 22-1576300 **Types of Property** (b) (d) (a) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests Books and publications Clothing and household goods Χ 564 291,805 FMV at date of gift Cars and other vehicles Boats and planes . . Intellectual property . . Х 1,141,361 FMV at date of gift Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . 23 Scientific specimens . . . 24 Archeological artifacts . . Χ 3,847,463 Fair Market Value 25 Other ▶ (Program Equipment) 26 Other ▶ (_____ 28 Number of Forms 8283 received by the organization during the tax year for contributions 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 No Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2017) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

I, column (b), the number of contributions, the number of items received, or a combination of both this part for any additional information. Return Reference Explanation Schedule M, Part I, Line 6 Number of vehicles donated Schedule M, Part I, Line 9 Number of stocks donated Schedule M, Part I, Lines 25-28 Number of donations								
Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.								
Return Reference	Explanation							
Schedule M, Part I, Line 6	Number of vehicles donated							
Schedule M, Part I, Line 9	Number of stocks donated							
Schedule M, Part I, Lines 25-28	Number of donations							
Schedule M, Part I, Line 32b	BSA contracted with Automotive Recovery Services (dba Insurance Auto Auctions-IAA) to manage the national "One Car, One Difference" program 95% of the proceeds are distributed to local Councils Distributions are based upon the donor's designation or, if none, payments are made to the local Council servicing the area of the donor's zip code							
	Schedule M (Form 990) (2017)							



Return Explanation
Reference

Form 990, Part VI,
Section B,
Line 11b
Form 990 was reviewed and approved by the Controller and National Legal Counsel An execut ive summary was prepared and that, along with Form 990 without Schedule B, was distributed to the Officers and the Audit Committee for their review PricewaterhouseCoopers reviewed and signed Form 990 as paid preparer Finally, Form 990 without Schedule B was distribute d to all Executive Board members before it was filed Schedule B was not included due to c onfidentiality agreements with donors, some of which are members of the Executive Board

Return Reference
Form 990, Annually a conflict of interest policy confirmation is required of the organization's Exec

Part VI,
Section B,
Line 12c
Line 12c
Line for review and resolution. The report, issue, and resolution are presented to the Audit Committee of the Committee of the Organization uses.

Affiliating a conflict of interest points conflict of the Gallication's Exect of the Organization uses.

an outside company for anonymous reporting of potential ethics violations. A report of the Violation is e-mailed to Internal Audit and National Legal Counsel for thorough research, review and resolution. The report, issue, and resolution are presented to the Audit Committee of the Organization uses.

Return Explanation
Reference

Line 15

Form 990,
Part VI,
Section B.

The compensation committee of the National executive board used comparative data to determ inception in the annual salaries of the key executives and officers of the BSA. They discussed and documented the decision for compensation in the meeting minutes of the committee.

Return Explanation
Reference

Line 19

Form 990,
Part VI,
Section C.

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As Filed Data -

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493275007068 OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization BOY SCOUTS OF AMERICA

Department of the Treasury

SCHEDULE R

(Form 990)

Employer identification number

						22-1576300			
Part I Identification of Disregarded Entities Compl	ete if the organization answe	red "Y	es" on Form 9	990, F	art IV, line 33	3.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity		(c) Legal domicile (or foreign cour		(d) Total income	(e) End-of-year asset	s Direct controll entity	ng	
(1) BSA Asset Management LLC 1325 West Walnut Hill Lane Irving, TX 750383008 26-2473220	General Partner/Investme	General Partner/Investments		DE		0	0 N/A		_
(2) Atikokan Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base oper	ation	CA		577,72	0	0 N/A		
(3) Atikakı Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base oper	ation	CA		321,42	7	0 N/A		
(4) Association of Baptists for Scouting 1325 West Walnut Hill Lane Irving, TX 75038 74-6061216	Scouting		TX		2,49	5	0 N/A		
(5) New World 19 LLC 1325 West Walnut Hill Lane Irving, TX 75038 37-1793510	World Jamboree		TX			0	0 N/A		
Part II Identification of Related Tax-Exempt Organizarelated tax-exempt organizations during the tax y		nızatıc	n answered "	Yes" (on Form 990,	Part IV, line 34	because it had one o	r more	_
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) al domicile (state foreign country)		(d) pt Code section	(e) Public charity statu (if section 501(c)(3)		Section (13) co en	(g) n 512(b) ontrolled tity?
(1)Learning for Life 1329 West Walnut Hill Lane	Youth development		DC	501(c)(3)		10		Yes	No No
Irving, TX 75038 75-2396057							N/A		
(2)National Boy Scouts of America Foundation 1325 West Walnut Hill Lane	Support Scouting		DC	501(c)(3)		7	N/A		No
Irving, TX 750383008 75-2675978	Company Language Faul Fa	1	TX	E01/-	(2)	7	1		No.
(3)Learning for Life Foundation 1329 West Walnut Hill Lane Irving, TX 75038	Support Learning for Life programs		1.8	501(c)	((3)	,	Learning for Life		No
26-2270708 (4)Scout Executives Alliance	Support Scouts' employees		TX	501(c)	1(9)			Yes	_
PO Box 152079	Support Scouts Cimployees			301(0	((3)		N/A	163	
Irving, TX 750152079 22-6069455									
(5)Boy Scouts of America Employee Welfare Benefits PlanP O Box 152079	Welfare Benefits Plan		TX	501(c)	0(9)		N/A	Yes	
Irving, TX 750152079 75-2347824									
(6)Arrow WV Inc 1325 West Walnut Hill Lane	Develop program & facility for Boy Scouts		WV	501(c	0(3)	7	Boy Scouts of America	Yes	
Irving, TX 750383008 27-0441319									
(7)BSA Endowment Master Trust 1325 West Walnut Hill Lane	Support Scouting		DE	501(c)(3)	12	N/A		No
Irving, TX 750383008 27-6850785							N/A		

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of- year assets	alloca	rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or iging ner?	(k Percer owner
Commingled Endowment Fund LP		Endowment	DE	N/A	Excluded	14,721,746	374,567,313	Yes	No	-34,890	Yes	No No	59 6
t Walnut Hill Lane 750383008 14		investment	<i>DE</i>	IV C	Lxcluded	14,721,740	374,307,313	163		34,030		140	
Identification of Related Orga because it had one or more relat	nizations Taxable ed organizations tre	as a Corpora ated as a corpo	tion or oration	Trust Com or trust dur	iplete if the oi ing the tax ye	ganızatıon a ar.	nswered "Yes	s" on F	orm 9	190, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary acti		(c) Legal domicile (state or foreign country)		(d) Direct controlling entity	(e) Type of entity (C corp, S corp or trust)		Shar	(g) e of end year assets	-of- Perc	(h) entage ership	:	(I Section (13) cor enti
		<u></u>	Countr	Y)	<u> </u>		1	1		_			Yes
												-	-

No

No

No

No

No

No

No

1c

1d Yes

1e

1f

1g 1h

1i

1j Yes

1k

11 Yes

1m Yes

1n Yes

10 Yes

1p

1r Yes

1s Yes

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

Interest expense incurred by Arrow through the construction of the

Summit Bechtel Reserve, which if constructed by the Boy Scouts of

Yes 1q |

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.							
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	T	Yes	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	Т						

1a Yes a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity............. **1**b Yes Yes

Gift, grant, or capital contribution from related organization(s) .

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

m

a-ı

(b)

Transaction

type (a-s)

(c)

Amount involved

59,991,296

12.000

632,271

6.033.113

15,049,303

2,600,821

Per tax return

America would also be exempt

Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) .

Dividends from related organization(s) . Sale of assets to related organization(s).

Purchase of assets from related organization(s).

Lease of facilities, equipment, or other assets to related organization(s)

Performance of services or membership or fundraising solicitations for related organization(s) . . .

m Performance of services or membership or fundraising solicitations by related organization(s) . . .

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Reimbursement paid to related organization(s) for expenses . . .

(a)

Name of related organization

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s) . . .

(1)Boy Scouts of America Employee Welfare

(5)BSA Commingled Endowment Fund LP

(6)BSA Commingled Endowment Fund LP

Benefits Plan

(4)Arrow WV Inc

(2)Scout Executives Alliance

(3)Scout Executives Alliance

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017 1329 West Walnut Hill Lane

1325 West Walnut Hill Lane Irving, TX 750383008 75-2675978

1329 West Walnut Hill Lane

1325 West Walnut Hill Lane Irving, TX 750383008 27-0441319

1325 West Walnut Hill Lane Irving, TX 750383008 27-6850785

Irving, TX 75038 75-2396057

Irving, TX 75038 26-2270708

PO Box 152079 Irving, TX 750152079 22-6069455

Benefits Plan P O Box 152079 Irving, TX 750152079 75-2347824

Software ID: 17005980 **Software Version:** v1.00

> **EIN:** 22-1576300 Name: BOY SCOUTS OF AMERICA

> > Youth development

Support Scouting

programs

Support Scouts'

Welfare Benefits Plan

Develop program &

Support Scouting

facility for Boy Scouts

employees

Support Learning for Life

Form 990, Schedule R, Part II - Identification of Related Ta	ax-Exempt Organizatio	ons				
(a)	(b)	(c)	(d)	(e)	(f)	(g)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Exempt Code	Public charity	Direct controlling	Section 512

(state

or foreign country)

DC

DC

TX

TX

TX

WV

DE

section

501(c)(3)

501(c)(3)

501(c)(3)

501(c)(9)

501(c)(9)

501(c)(3)

501(c)(3)

status

(if section 501(c)

(3))

10

12

(b)(13)

controlled

entity? Yes

No

No

No

Νo

Yes

Yes

Yes

No

entity

N/A

N/A

N/A

N/A

N/A

Learning for Life

Boy Scouts of America

(a) (b) (c) Name of related organization Transaction Amount Involved (d) type(a-s) Method of determining amount involved Boy Scouts of America Employee Welfare 59,991,296 Per tax return Benefits Plan Scout Executives Alliance 12,000 Per tax return m Scout Executives Alliance 632,271 Per tax return

Form 990, Schedule R, Part V - Transactions With Related Organizations

BSA Commingled Endowment Fund LP

Arrow WV Inc	а-і	, ,	Interest expense incurred by Arrow through the construction of the Summit Bechtel Reserve, which if constructed by the Boy
			Scouts of America would also be exempt
BSA Commingled Endowment Fund LP	s	15,049,303	Per tax return

2,600,821

Per tax return